

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|-----------|---------|
| FEE DETERMINATION | BA | 70385 | |
| O.I.P.E. CLASSIFIER | | 10 2-9-99 | |
| FORMALITY REVIEW | Y.M. | 71628 | 2-11-99 |

INDEX OF CLAIMS

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| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

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If more than 150 claims or 10 actions
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Best Available Copy